

2197193
219744

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

RECEIVED

OCT 20 2009

Winston Alleyne

ORS
T.T.W.W.M

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

2009- 277 T

NUMBER:

1997 - 35 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Terry Foster

Telephone:

843-407-4090

Address: 1245 Celebration Blvd

Fax:

843-664-0831

Florida, SC 29301

Other:

Email:

Terry @ commercial-ins.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class A/A Restricted

☒ Application - Class C Taxi

☐ Application - Class C Charter

☐ Application - Class C Charter Bus

☐ Application - Class C Non-Emergency

☐ Application - Class C Stretcher Van

☐ Application - Class E Household Goods

☐ Application - Class E Hazardous Waste

☐ Application

☐ Request for Extension to Comply with Order

☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded

☐ Request for Cancellation of Certificate

☐ Request for Suspension

☒ Request for Reinstatement

☐ Request for Name Change on Certificate

☐ Request to Amend Scope of Authority

☐ Request to Amend Tariff (rate increase, etc.)

☐ Request to Amend Passenger Limit

☐ Request

☐ Exhibit

☐ Late-Filed Exhibit

☐ Letter

☐ Proposed Order

☐ Publisher's Affidavit

☐ Reservation Letter

☐ Response

☐ Return to Petition

☐ Other:

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Print Form

Reset Form

Winston Alleyne

CLASS C REINSTATEMENT FORM

File the original with:

Public Service Commission of South Carolina
Docketing Department
Motor Carrier Matters
P.O. Box 11649
Columbia, S.C. 29211
(803) 896 - 5100
FAX (803) 896-5199

RECEIVED

OCT 20 2009

ORS
T, T, W, W, W

Mail or fax a copy to:

S.C. Office of Regulatory Staff
Transportation Department
1401 Main Street, Suite 900
Columbia, S.C. 29201
(803) 737-0578
FAX (803) 737-0815

DATE: 10-19-09

Please consider this an application for Reinstatement of my:

☒ Taxi Certificate Number Class C #6463

☐ Charter Certificate Number _____

☐ Charter Bus Certificate Number _____

☐ Non-Emergency Certificate Number _____

My certificate was revoked/cancelled on 9-30-09 because 2008 Annual Report
(DATE)

was turned in late

I am seeking reinstatement because I would like to continue running a taxi
business.

Winter Allgood
(Name of Company)

DBA _____
(if applicable)

711 N Willston Rd
(Street Address)

(Mailing Address if different from Street Address)

Florence, SC 29504
(City, State, Zip Code)

Winter Allgood
(Signature)

(Telephone Number)

owner
(Title)

RECEIVED

OCT 20 2009

ORS Revised 9-12-08

PSC SC
DOCKETING DEPT.